

## General Assembly

## **Amendment**

January Session, 2005

LCO No. 7585

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Offered by:

SEN. MURPHY, 16th Dist.

To: Subst. Senate Bill No. 1093

File No. 410

Cal. No. 332

## "AN ACT CONCERNING REVISIONS TO THE DEPARTMENT OF MENTAL RETARDATION STATUTES."

- 1 Change the effective date of sections 2 and 4 to "Effective from
- 2 passage"
- 3 After the last section, add the following and renumber sections and
- 4 internal references accordingly:
- 5 "Sec. 501. Subsection (b) of section 5-270 of the general statutes is
- 6 repealed and the following is substituted in lieu thereof (Effective July
- 7 1, 2005):
- 8 (b) "Employee" means any employee of an employer, whether or not
- 9 in the classified service of the employer, except elected or appointed
- 10 officials other than special deputy sheriffs, board and commission
- 11 members, disability policy specialists assigned to the Council on
- 12 <u>Developmental Disabilities</u>, managerial employees and confidential
- 13 employees.

Sec. 502. Section 5-198 of the general statutes is amended by adding subsection (cc) as follows (*Effective July 1, 2005*):

- 16 (NEW) (cc) Disability policy specialists employed by the Council on 17 Developmental Disabilities.
- Sec. 503. Subsection (a) of section 17a-248b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from* passage):
- 21 (a) The lead agency shall establish a State Interagency Birth-to-Three 22 Coordinating Council and shall provide staff assistance and other 23 resources to the council. The council shall consist of the following 24 members, appointed by the Governor: (1) [Six parents,] Parents, 25 including minority parents, of children with disabilities twelve years of 26 age or younger, with knowledge of, or experience with, programs for 27 children from birth to thirty-six months of age with disabilities, the 28 total number of whom shall equal not less than twenty per cent of the 29 total membership of the council, and at least one of whom shall be a 30 parent of a child six years of age or younger, with a disability; (2) two 31 members of the General Assembly at the time of their appointment, 32 one of whom shall be designated by the speaker of the House of 33 Representatives and one of whom shall be designated by the president 34 pro tempore of the Senate; (3) one person involved in the training of 35 personnel who provide early intervention services; (4) one person who 36 is a member of the American Academy of Pediatrics; (5) one person 37 from each of the participating agencies, who shall be designated by the 38 commissioner or executive director of the participating agency and 39 who have authority to engage in policy planning and implementation on behalf of the participating agency; (6) [five approved] public or 40 41 private providers of early intervention services, the total number of 42 whom shall equal not less than twenty per cent of the total 43 membership of the council; and (7) a representative of a Head Start 44 program or agency. The Governor shall designate the chairperson of 45 the council who shall not be the designee of the lead agency.

46 Sec. 504. (Effective from passage) On or before October 1, 2005, the 47 Department of Mental Retardation and the Office of Protection and 48 Advocacy for Persons with Disabilities shall jointly develop and 49 implement an interagency agreement governing communication and 50 collaboration between said agencies with regard to the investigation of 51 allegations of abuse and neglect of persons being served by said 52 agencies and the provision of protective services to such persons. On 53 or before January 1, 2006, such agreement shall be submitted, in 54 accordance with the provisions of section 11-4a of the general statutes, 55 to the joint standing committees of the General Assembly having 56 cognizance of matters relating to human services and public health. 57 Such agreement shall ensure that each office carries out investigative 58 responsibilities and the provision of protective services efficiently and 59 in a manner calculated to protect the best interests of persons with 60 disabilities, and shall include, but not be limited to:

- (1) A statement of common goals and principles;
- 62 (2) Communication guidelines identifying the individuals within 63 each agency responsible for communicating information pertaining to 64 investigations of abuse and neglect and the provision of protective 65 services;
- 66 (3) Guidelines identifying the responsibilities of each agency with 67 respect to investigations of abuse and neglect and the individuals in 68 each agency who shall carry out such investigative responsibilities;
- 69 (4) Interagency documentation and reporting procedures;
- 70 (5) Operational safeguards and security and confidentiality 71 guidelines, in accordance with applicable federal privacy laws;
- 72 (6) Dispute resolution procedures; and
- 73 (7) Standards for reviewing and evaluating third party 74 investigations.

Sec. 505. Section 17a-210 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2005*):

78 (a) There shall be a Department of Mental Retardation. The 79 Department of Mental Retardation, with the advice of a Council on 80 Retardation, be responsible for the planning, shall 81 development and administration of complete, comprehensive and 82 integrated state-wide services for persons with mental retardation and 83 persons medically diagnosed as having Prader-Willi syndrome. The 84 Department of Mental Retardation shall be under the supervision of a 85 Commissioner of Mental Retardation, who shall be appointed by the 86 Governor in accordance with the provisions of sections 4-5 to 4-8, 87 inclusive. The Council on Mental Retardation may advise the 88 Governor on the appointment. The commissioner shall be a person 89 has background, training, education or experience in 90 administering programs for the care, training, education, treatment 91 and custody of persons with mental retardation. The commissioner 92 shall be responsible, with the advice of the council, for: (1) Planning 93 and developing complete, comprehensive and integrated state-wide 94 services for persons with mental retardation; (2) the implementation 95 and where appropriate the funding of such services; and (3) the 96 coordination of the efforts of the Department of Mental Retardation 97 with those of other state departments and agencies, municipal 98 governments and private agencies concerned with and providing 99 services for persons with mental retardation. The commissioner shall 100 be responsible for the administration and operation of the state 101 training school, state mental retardation regions and all state-operated 102 community-based residential facilities established for the diagnosis, 103 care and training of persons with mental retardation. The 104 commissioner shall be responsible for establishing standards, 105 providing technical assistance and exercising the requisite supervision 106 of all state-supported residential, day and program support services 107 for persons with mental retardation and work activity programs 108 operated pursuant to section 17a-226. The commissioner shall conduct 109 or monitor investigations into allegations of abuse and neglect and file

reports as requested by state agencies having statutory responsibility for the conduct and oversight of such investigations. In the event of the death of a person with mental retardation for whom the department has direct or oversight responsibility for medical care, the commissioner shall ensure that a comprehensive and timely review of the events, overall care, quality of life issues and medical care preceding such death is conducted by the department and shall, as requested, provide information and assistance to the Independent Mortality Review Board established by Executive Order No. 25 of Governor John G. Rowland. The commissioner shall report to the board and the board shall review any death: (A) Involving an allegation of abuse or neglect; (B) for which the Office of Chief Medical Examiner or local medical examiner has accepted jurisdiction; (C) in which an autopsy was performed; (D) which was sudden and unexpected; or (E) in which the commissioner's review raises questions about the appropriateness of care. The commissioner shall stimulate research by public and private agencies, institutions of higher learning and hospitals, in the interest of the elimination and amelioration of retardation and care and training of persons with mental retardation.

(b) The commissioner shall be responsible for the development of criteria as to the eligibility of any person with mental retardation for residential care in any public or state-supported private institution and, after considering the recommendation of a properly designated diagnostic agency, may assign such person to a public or state-supported private institution. The commissioner may transfer such persons from one such institution to another when necessary and desirable for their welfare, provided such person and such person's parent, conservator, guardian or other legal representative receive written notice of their right to object to such transfer at least ten days prior to the proposed transfer of such person from any such institution or facility. Such prior notice shall not be required when transfers are made between residential units within the training school or a state mental retardation region or when necessary to avoid a serious and immediate threat to the life or physical or mental health of such person

or others residing in such institution or facility. The notice required by this subsection shall notify the recipient of his or her right to object to such transfer, except in the case of an emergency transfer as provided in this subsection, and shall include the name, address and telephone number of the Office of Protection and Advocacy for Persons with Disabilities. In the event of an emergency transfer, the notice required by this subsection shall notify the recipient of his or her right to request a hearing in accordance with subsection (c) of this section and shall be given within ten days following the emergency transfer. In the event of an objection to the proposed transfer, the commissioner shall conduct a hearing in accordance with subsection (c) of this section and the transfer shall be stayed pending final disposition of the hearing, provided no such hearing shall be required if the commissioner withdraws such proposed transfer.

(c) [The] Any person with mental retardation who is eighteen years of age or older and who resides at any institution or facility operated by the Department of Mental Retardation, or the parent, guardian, conservator or other legal representative of any person with mental retardation who resides at any [institution or facility operated by the Department of Mental Retardation, or any person with mental retardation himself or herself, who is eighteen years of age or older and who resides at any such institution or facility, may object to any transfer of such person from one institution or facility to another for any reason other than a medical reason or an emergency, or may request such a transfer. In the event of any such objection or request, the commissioner shall conduct a hearing on such proposed transfer, provided no such hearing shall be required if the commissioner withdraws such proposed transfer. In any such transfer hearing, the proponent of a transfer shall have the burden of showing, by clear and convincing evidence, that the proposed transfer is in the best interest of the resident being considered for transfer and that the facility and programs to which transfer is proposed (1) are safe and effectively supervised and monitored, and (2) provide a greater opportunity for personal development than the resident's present setting. Such hearing

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shall be conducted in accordance with the provisions of chapter 54.

(d) [The] Any person, or the parent, guardian, conservator or other legal representative of [a] such person, [or the person himself or herself,] may request a hearing for any final determination by the department [which] that denies such person eligibility for programs and services of the department. A request for a hearing shall be made in writing to the commissioner. Such hearing shall be conducted in accordance with the provisions of chapter 54.

- (e) Any person with mental retardation, or the parent, guardian, conservator or other legal representative of such person, may request a hearing to contest the priority assignment made by the department for persons seeking residential placement, residential services or residential support. A request for hearing shall be made, in writing, to the commissioner. Such hearing shall be conducted in accordance with the provisions of chapter 54.
- [(e) The] (f) Any person with mental retardation or the parent, guardian, conservator or other legal representative of [a] such person, [or the person himself or herself,] may object to (1) a proposed approval by the department of a program for such person [which] that includes the use of behavior-modifying medications or aversive procedures, or (2) a proposed determination of the department that community placement is inappropriate for such person placed under the direction of the commissioner. The department shall provide written notice of any such proposed approval or determination to the person, or to the parent, guardian, conservator or other legal representative of such person, [or the person himself or herself,] at least ten days prior to making such approval or determination. In the event of an objection to such proposed approval or determination, the commissioner shall conduct a hearing in accordance with the provisions of chapter 54, provided no such hearing shall be required if the commissioner withdraws such proposed approval determination.

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Sec. 506. (NEW) (*Effective July 1, 2005*) In determining the service component of the rates to be paid by the state under sections 17b-244 of the general statutes, as amended by this act, and 17b-246 of the general statutes, as amended by this act, to private facilities and facilities operated by regional education service centers that are licensed to provide residential care pursuant to section 17a-227 of the general statutes, but not certified to participate in the Title XIX Medicaid programs as intermediate care facilities for persons with mental retardation, the Commissioner of Mental Retardation shall consider for each facility the actual wage and benefit costs for services and service providers, adjusted for inflation, and said commissioner shall not establish a single fixed amount for wage and benefit costs that is applicable to all such facilities.

- Sec. 507. Subsection (a) of section 17b-244 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 1, 2005):
  - (a) The room and board component of the rates to be paid by the state to private facilities and facilities operated by regional education service centers which are licensed to provide residential care pursuant to section 17a-227, but not certified to participate in the Title XIX Medicaid program as intermediate care facilities for persons with mental retardation, shall be determined annually by the Commissioner of Social Services, except that rates effective April 30, 1989, shall remain in effect through October 31, 1989. Any facility with real property other than land placed in service prior to July 1, 1991, shall, for the fiscal year ending June 30, 1995, receive a rate of return on real property equal to the average of the rates of return applied to real property other than land placed in service for the five years preceding July 1, 1993. For the fiscal year ending June 30, 1996, and any succeeding fiscal year, the rate of return on real property for property items shall be revised every five years. The commissioner shall, upon submission of a request by such facility, allow actual debt service, comprised of principal and interest, on the loan or loans in lieu of property costs allowed pursuant to section 17-313b-5 of the regulations

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244 of Connecticut state agencies, whether actual debt service is higher or 245 lower than such allowed property costs, provided such debt service 246 terms and amounts are reasonable in relation to the useful life and the 247 base value of the property. In the case of facilities financed through the 248 Connecticut Housing Finance Authority, the commissioner shall allow 249 actual debt service, comprised of principal, interest and a reasonable 250 repair and replacement reserve on the loan or loans in lieu of property 251 costs allowed pursuant to section 17-313b-5 of the regulations of 252 Connecticut state agencies, whether actual debt service is higher or 253 lower than such allowed property costs, provided such debt service 254 terms and amounts are determined by the commissioner at the time 255 the loan is entered into to be reasonable in relation to the useful life 256 and base value of the property. The commissioner may allow fees 257 associated with mortgage refinancing provided such refinancing will 258 result in state reimbursement savings, after comparing costs over the 259 terms of the existing proposed loans. For the fiscal year ending June 30, 260 1992, the inflation factor used to determine rates shall be one-half of 261 the gross national product percentage increase for the period between 262 the midpoint of the cost year through the midpoint of the rate year. For 263 fiscal year ending June 30, 1993, the inflation factor used to determine 264 rates shall be two-thirds of the gross national product percentage 265 increase from the midpoint of the cost year to the midpoint of the rate 266 year. For the fiscal years ending June 30, 1996, and June 30, 1997, no 267 inflation factor shall be applied in determining rates. The 268 Commissioner of Social Services shall prescribe uniform forms on 269 which such facilities shall report their costs. Such rates shall be 270 determined on the basis of a reasonable payment for necessary 271 services. Any increase in grants, gifts, fund-raising or endowment 272 income used for the payment of operating costs by a private facility in 273 the fiscal year ending June 30, 1992, shall be excluded by the 274 commissioner from the income of the facility in determining the rates 275 to be paid to the facility for the fiscal year ending June 30, 1993, 276 provided any operating costs funded by such increase shall not 277 obligate the state to increase expenditures in subsequent fiscal years. 278 Nothing contained in this section shall authorize a payment by the

279 state to any such facility in excess of the charges made by the facility 280 for comparable services to the general public. The service component 281 of the rates to be paid by the state to private facilities and facilities 282 operated by regional education service centers which are licensed to 283 provide residential care pursuant to section 17a-227, but not certified 284 to participate in the Title XIX Medicaid programs as intermediate care 285 facilities for persons with mental retardation, shall be determined 286 annually by the Commissioner of Mental Retardation in accordance 287 with section 506 of this act."